

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) PPI-111
	In re Application of Marc B. Garnick	
	Application Number 10/619684	Filed July 14, 2003
	For: METHODS FOR TREATING HORMONE ASSOCIATED CONDITIONS USING A COMBINATION OF LHRH ANTAGONISTS AND SPECIFIC ESTROGEN RECEPTOR MODULATORS	
	Art Unit 1646	Examiner Not Yet Assigned

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | | |
|-------------------------------------|----------------------------------|-----------|
| <input type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$ _____ |
| <input checked="" type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ 420.00 |
| <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$ _____ |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ _____ |

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 210.00 .

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080 .

I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record. Registration Number _____

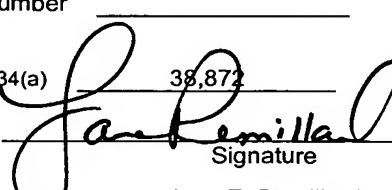
attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 38,872

February 9, 2004

Date

(617) 227-7400

Telephone Number


Signature

Jane E. Remillard

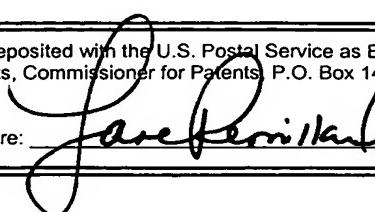
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

Total of _____ forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 982 739 285 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: February 9, 2004

Signature: 
(Jane E. Remillard)